



HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, PACIFIC TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
email: ethics@hawaiiethics.org

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STATE OF HAWAII
STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST

NAME(Last)	(First)	(Middle)	TELEPHONE: (808) 848-4142
BROWN	WILLIAM	Y.	
MAILING ADDRESS (Street)			FAX: (808) 841-4575
1525 BERNICE STREET			
(City)	(State)	(Zip Code)	
HONOLULU	HAWAII	96817	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
MAILING ADDRESS (Street)			FAX
(City)	(State)	(Zip Code)	

PART II ORGANIZATION

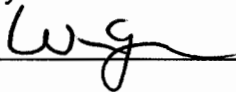
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)	TELEPHONE: (808) 848-4102	
BISHOP MUSEUM		
MAILING ADDRESS (Street)	FAX: (808) 841-8968	
1525 BERNICE STREET		
(City)	(State)	(Zip Code)
HONOLULU	HAWAII	96817
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT	TELEPHONE: (808) 848-4170	
DENISE HAYASHI		
MAILING ADDRESS (Street)	FAX: (808) 842-4703	
1525 BERNICE STREET		
(City)	(State)	(Zip Code)
HONOLULU	HAWAII	96817

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

<input type="checkbox"/> Agriculture	<input checked="" type="checkbox"/> Education	<input type="checkbox"/> Human Services	<input checked="" type="checkbox"/> Science, Technology & Economic Development
<input type="checkbox"/> Communications & Public Utilities	<input type="checkbox"/> Government Operations & Finance	<input type="checkbox"/> Intergovernmental Relations, International Affairs	<input type="checkbox"/> Tourism & Recreation
<input type="checkbox"/> Consumer Protection & Commerce	<input type="checkbox"/> Hawaiian Affairs	<input type="checkbox"/> Labor & Employment	<input type="checkbox"/> Transportation
<input checked="" type="checkbox"/> Culture, Arts, Historic Preservation	<input type="checkbox"/> Health	<input type="checkbox"/> Planning, Land & Water Use Management	<input type="checkbox"/> Other: (indicate below)
<input type="checkbox"/> Ecology, Energy Environmental Protection	<input type="checkbox"/> Housing	<input type="checkbox"/> Public Safety & Corrections	

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.




(Signature of Lobbyist)

6-21-05

(Date)

PART V AUTHORIZATION TO LOBBY

NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
Michael T. Chinaka		Vice President, Treasurer, CFO	
NAME OF ORGANIZATION (if applicable)		TELEPHONE	
Bishop Museum		(808) 848-4161	
MAILING ADDRESS (Street)		FAX	
1525 Bernice Street		(808) 841-8968	
(City)	(State)	(Zip Code)	
Honolulu	HI	96817	
<i>I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.</i>			
		7/8/05	
(Signature of Authorizing Officer or Person Represented)		(Date)	